



BUSINESS/PROFESSIONAL/FARM CORPORATION
INTENT TO DISSOLVE
 SECRETARY OF STATE
 SFN 13006 (06-2006)

FOR OFFICE USE ONLY

ID#:	
WO#:	
Filed:	By:

1. FILING FEE \$10.00

For reference, see N.D.C.C., Section 10-19.1-108.

TYPE OR PRINT LEGIBLY

SEE REVERSE SIDE FOR FEES, FILING AND MAILING INSTRUCTIONS.

2. The name of the corporation:		3. Federal ID #:
4. Date when a majority of the shareholders adopted a resolution to dissolve: (month/day/year)		
5. Place where the shareholders met and adopted the resolution to dissolve: (complete address)		
6. Method of adoption of the resolution to dissolve: (check one)		
<input type="checkbox"/> Resolution was adopted by affirmative vote of a majority of the shareholders entitled to vote; OR <input type="checkbox"/> A written action approving the resolution to dissolve signed by a majority of the shareholders entitled to vote.		
7. "The undersigned, a person authorized by the corporation to sign this Intent to Dissolve, has read the foregoing statements, knows the contents thereof, and believes the statements made therein to be true."		
Signature:		Date:
8. Name of person to contact if questions about this form:	E-mail address:	Daytime telephone #:

